

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 13  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>1911 UNITED</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00508200	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Dauphine Orleans Hotel</b>		Date MM / DD / YYYY <b>07 / 07 / 2012</b>	
Mailing Address <b>415 Dauphine Street</b>		Amount <b>271.07</b>	
City <b>New Orleans</b>	State <b>LA</b>	Zip Code <b>70112</b>	Transaction ID : <b>SE.4597</b>
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>54250.49</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>DeJavu</b>		Date MM / DD / YYYY <b>07 / 06 / 2012</b>	
Mailing Address <b>400 Dauphine Street</b>		Amount <b>35.77</b>	
City <b>New Orleans</b>	State <b>LA</b>	Zip Code <b>70012</b>	Transaction ID : <b>SE.4563</b>
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>53047.57</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>306.84</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Sinclair Skinner*

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**07 / 13 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 13  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>1911 UNITED</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00508200		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span>					
Full Name (Last, First, Middle Initial) of Payee <b>ExxonMobile</b>			Date <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span> <b>07 / 06 / 2012</b>		
Mailing Address <b>704 Howard Avenue</b>			Amount <span style="border: 1px solid black; padding: 2px;">140.20</span>		
City <b>New Orleans</b>		State <b>LA</b>	Zip Code <b>70130</b>		
Purpose of Expenditure <b>Travel Expenses</b>		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">53011.80</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee <b>FedEx Office</b>			Date <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span> <b>07 / 07 / 2012</b>		
Mailing Address <b>901 Convention Center Blvd.</b>			Amount <span style="border: 1px solid black; padding: 2px;">109.11</span>		
City <b>New Orleans</b>		State <b>LA</b>	Zip Code <b>70130</b>		
Purpose of Expenditure <b>Office Supplies and Expenses</b>		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">53602.75</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;">249.31</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;"> <span style="margin-right: 100px;"><i>Sinclair Skinner</i></span> <span style="margin-right: 50px;">[Electronically Filed]</span> <span>Date <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span> <b>07 / 13 / 2012</b></span> </p> <p>Signature _____</p>					

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>1911 UNITED</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00508200	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>FedEx Office</b>			Date MM / DD / YYYY <b>07 / 07 / 2012</b>	
Mailing Address <b>901 Convention Center Blvd.</b>			Amount <b>305.17</b>	
City <b>New Orleans</b>	State <b>LA</b>	Zip Code <b>70130</b>	Transaction ID : <b>SE.4579</b>	
Purpose of Expenditure Office Supplies and Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>53907.92</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>James Freeman</b>			Date MM / DD / YYYY <b>07 / 09 / 2012</b>	
Mailing Address <b>1105 Jackson Road #B</b>			Amount <b>500.00</b>	
City <b>Griffin</b>	State <b>GA</b>	Zip Code <b>30223</b>	Transaction ID : <b>SE.4606</b>	
Purpose of Expenditure Canvassing Stipend		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>57570.54</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>805.17</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Sinclair Skinner*

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**07 / 13 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 13  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>1911 UNITED</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00508200		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					

  

Full Name (Last, First, Middle Initial) of Payee <b>Hotel Tonight</b>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 06 / 2012		
Mailing Address 144 Second Street 3rd Floor			Amount <span style="border: 1px solid black; padding: 2px;">249.00</span>		
City San Francisco	State CA	Zip Code 94105	Transaction ID : SE.4577		
Purpose of Expenditure Travel Expenses		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">53296.57</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		

  

Full Name (Last, First, Middle Initial) of Payee <b>Kayak Travel</b>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 08 / 2012		
Mailing Address 55 N. Water Street Suite 1			Amount <span style="border: 1px solid black; padding: 2px;">204.24</span>		
City Norwalk	State CT	Zip Code 06854	Transaction ID : SE.4592		
Purpose of Expenditure Travel Expenses		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____		
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">54833.94</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		

  

(a) SUBTOTAL of Itemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;">453.24</span>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) TOTAL Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"> </span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

[Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y  
07 / 13 / 2012

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>1911 UNITED</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00508200	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Krystal</b>			Date MM / DD / YYYY <b>07 / 05 / 2012</b>	
Mailing Address <b>1211 Industrial Parkway</b>			Amount <b>54.56</b>	
City <b>Saraland</b>	State <b>AL</b>	Zip Code <b>36571</b>	Transaction ID : <b>SE.4584</b>	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>52871.60</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Malones</b>			Date MM / DD / YYYY <b>07 / 09 / 2012</b>	
Mailing Address <b>1258 Virginia Avenue</b>			Amount <b>110.90</b>	
City <b>Atlanta</b>	State <b>GA</b>	Zip Code <b>30344</b>	Transaction ID : <b>SE.4590</b>	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>55170.54</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>165.46</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Sinclair Skinner*

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**07 / 13 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C

C00508200

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Marriott

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 859 Convention Center Blvd.

Amount

225.70

City

New Orleans

State

LA

Zip Code

70130

Transaction ID : SE.4594

Purpose of Expenditure  
Travel ExpensesCategory/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

55059.64

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

New Orleans Convention Center Concessions

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Mailing Address 900 Convention Center Blvd.

Amount

71.50

City

New Orleans

State

LA

Zip Code

70130

Transaction ID : SE.4587

Purpose of Expenditure  
Travel ExpensesCategory/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

53979.42

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

297.20

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>1911 UNITED</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00508200	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>New York Camera</b>			Date MM / DD / YYYY <b>07 / 07 / 2012</b>	
Mailing Address <b>705 Canal Street</b>			Amount <b>108.98</b>	
City <b>New Orleans</b>	State <b>LA</b>	Zip Code <b>70130</b>	Transaction ID : <b>SE.4566</b>	
Purpose of Expenditure Office Supplies		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>53405.55</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Petro Inc.</b>			Date MM / DD / YYYY <b>07 / 08 / 2012</b>	
Mailing Address <b>428 Main Street</b>			Amount <b>182.45</b>	
City <b>Sorter</b>	State <b>AL</b>	Zip Code <b>36075</b>	Transaction ID : <b>SE.4560</b>	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>54432.94</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>291.43</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Sinclair Skinner*

Signature

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Date

MM / DD / YYYY  
**07 / 13 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 8 OF 13  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C C00508200

Check If ☐ 24-hour report ☒ 48-hour report☒ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Renaissance Hotel Atlanta

Date

M M M / D D D / Y Y Y Y Y Y  
07 / 09 / 2012

Mailing Address One Hartsfield Centre Parkway

Amount

112.00

City

Atlanta

State

GA

Zip Code

30354

Transaction ID : SE.4617

Purpose of Expenditure  
Travel ExpensesCategory/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

58751.18

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Purvis Rollins

Date

M M M / D D D / Y Y Y Y Y Y  
07 / 09 / 2012

Mailing Address 3429 14th Street Street NW

Amount

1000.00

City

Washington

State

DC

Zip Code

20010

Transaction ID : SE.4609

Purpose of Expenditure  
Canvassing StipendCategory/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

58570.54

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

1112.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

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Sinclair Skinner

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Date

M M M / D D D / Y Y Y Y Y Y  
07 / 13 / 2012

Signature



# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 9 OF 13  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C

C00508200

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

M M M /

D D D /

Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Sinclair Skinner

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 700 12th Street NW Suite 700

Amount

City

Washington

State

DC

Zip Code

20005

Purpose of Expenditure  
Vehicle RentalCategory/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

63351.18

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Damien Smith

Date

M M M /

D D D /

Y Y Y Y Y Y

Mailing Address 1714 N. McCadden #3106

Amount

City

Hollywood

State

CA

Zip Code

90028

Purpose of Expenditure  
Canvassing StipendCategory/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

59251.18

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

4500.00

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

[Electronically Filed]

Date

M M M /

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Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 10 OF 13  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)  
1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C C00508200

Check If ☐ 24-hour report ☒ 48-hour report

☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee  
Subway

Date

MM / DD / YYYY  
07 / 09 / 2012

Mailing Address 4051 Stone Mountain Hwy

Amount

68.64

City State Zip Code  
Lilburn GA 30047

Transaction ID : SE.4614

Purpose of Expenditure  
Travel Expenses

Category/  
Type

Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election  
for Office Sought 58639.18

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee  
Tony O. Thomas

Date

MM / DD / YYYY  
07 / 09 / 2012

Mailing Address 11301 Village Broad Drive

Amount

900.00

City State Zip Code  
Riverview FL 33579

Transaction ID : SE.4601

Purpose of Expenditure  
Canvassing Stipend

Category/  
Type

Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☒ President

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election  
for Office Sought 57070.54

Disbursement For: ☐ Primary ☒ General  
2012 ☐ Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

968.64

(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

[Electronically Filed]

Date

MM / DD / YYYY  
07 / 13 / 2012

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 11 OF 13  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>1911 UNITED</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00508200	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Tony O. Thomas</b>			Date MM / DD / YYYY <b>07 / 11 / 2012</b>	
Mailing Address <b>11301 Village Broad Drive</b>			Amount <b>100.00</b>	
City <b>Riverview</b>	State <b>FL</b>	Zip Code <b>33579</b>	Transaction ID : <b>SE.4603</b>	
Purpose of Expenditure Canvassing Stipend		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>59351.18</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>Trolley Stope Cafe</b>			Date MM / DD / YYYY <b>07 / 07 / 2012</b>	
Mailing Address <b>1923 St. Charles Avenue</b>			Amount <b>88.09</b>	
City <b>New Orleans</b>	State <b>LA</b>	Zip Code <b>70130</b>	Transaction ID : <b>SE.4569</b>	
Purpose of Expenditure Travel Expenses		Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>53493.64</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>188.09</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Sinclair Skinner*

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**07 / 13 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 12 OF 13  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>1911 UNITED</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00508200		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M M</span> / <span style="border: 1px solid black; padding: 2px;">D D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span>					

  

Full Name (Last, First, Middle Initial) of Payee <b>US Air</b>			Date <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span> <b>07 / 11 / 2012</b>		
Mailing Address <b>2345 Crystal Drive</b>			Amount <span style="border: 1px solid black; padding: 2px;">159.10</span>		
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22227</b>	Transaction ID : <b>SE.4620</b>		
Purpose of Expenditure <b>Travel Expenses</b>		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">63510.28</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____		

  

Full Name (Last, First, Middle Initial) of Payee <b>Marcus Neal Watts</b>			Date <span style="border: 1px solid black; padding: 2px;">M M</span> / <span style="border: 1px solid black; padding: 2px;">D D</span> / <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</span> <b>07 / 09 / 2012</b>		
Mailing Address <b>324 25th Street</b>			Amount <span style="border: 1px solid black; padding: 2px;">1000.00</span>		
City <b>Baltimore</b>	State <b>MD</b>	Zip Code <b>21218</b>	Transaction ID : <b>SE.4599</b>		
Purpose of Expenditure <b>Canvassing Stipend</b>		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BARACK OBAMA</b>			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">56170.54</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____		

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">1159.10</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

[Electronically Filed]

Signature \_\_\_\_\_ Date M M / D D / Y Y Y Y Y Y Y Y  
**07 / 13 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 13 OF 13  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

1911 UNITED

FEC IDENTIFICATION NUMBER ▼

C C00508200

Check If ☐ 24-hour report ☒ 48-hour report☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Westwood Truck Stop

Date

M M / D D / Y Y Y Y Y Y  
07 / 08 / 2012

Mailing Address 7340 Westbank Expressway

Amount

196.76

Transaction ID : SE.4575

Purpose of Expenditure  
Travel ExpensesCategory/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election  
for Office Sought

54629.70

Disbursement For: ☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date

M M / D D / Y Y Y Y Y Y

Mailing Address

Amount

Purpose of Expenditure

Category/  
Type

Office Sought:

☐ House

State:

☐ Senate

District:

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary☐ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

196.76

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶

10693.24

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sinclair Skinner

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
07 / 13 / 2012

Signature